

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Pavel HAMET et al.

Title:

PRE-CONDITIONING CELLS

**AGAINST DEATH** 

Appl. No.:

09/480,260

Filing Date:

1/11/2000

Examiner:

M. Meller

Art Unit:

1654

CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		
EV 576632862 US 6-01-05 (Express Mail Label Number) (Date of Deposit)		
Rene Campos (Printed Name) (Signature)		

## NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Applicant hereby appeals to the Board of Patent Appeals and Interferences from the decision of the Examiner in the Final Office Action dated December 2, 2004, finally rejecting Claims 19-28.

- [X] Applicant claims small entity status.
- [X] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:
- [X] Notice of Appeal Fee

[X] To be paid as detailed below

[ ]Not required (Fee paid in prior appeal)

06/06/2005 MAHMED1 00000012 09480260

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250.00 OP

The required fees are calculated below:

[X]	Notice of Appeal Fee	\$500.00
[X]	Extension for response filed within the third month:	\$1,020.00
[ ]	Extension Already Obtained for third month:	
	FEE TOTAL:	\$1,520.00
[X]	Small Entity Fees Apply (subtract ½ of above):	\$760.00
	TOTAL FEE:	\$760.00

- [ ] Please charge Deposit Account No. 50-0872 in the amount of A duplicate copy of this transmittal is enclosed.
- [X] A check in the amount of \$760.00 is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 6-1-05

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